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The diarrhoea or dysentery of *gambogia* is largely confined to children, and is aggravated in the morning or brought on from taking cold, becoming uncovered at a time of the year when we have hot nights and cool mornings; or in other words, from chilling of the solar plexus of nerves. (*Pod.*, *ars.*, *aloe*, *ver. alba.*, *croton tig.*, *ipéc.* and *sulph.*) During stool there is strong urging with cutting, colicky pain about the navel, cold sweat on the extremities, and tenesmus and burning in the anus. In young children we have rumbling and gurgling sounds in the abdomen before stool, like liquid being poured out of a bottle. Great relief after stool, as if some irritating substance was removed from the intestines. Urine has the odor of onions.

It has cured in intermittent fevers where the chill begins in the back and about 7 p. m. The chill is violent and prolonged, often lasting all night. The coldness is felt both internally and externally. There is *chattering of the teeth during the chill, with great thirst*. The heat stage is not marked except anxiety and flashes of heat. The patient awakens about 4 a. m., perspiring all over the body. The chill is usually accompanied with dysentery or diarrhoea, nausea, vomiting and purging.

In the eye we have itching of the inner canthus; the tears are acrid, and corrosive. The eye symptoms are relieved in the open air. The taste is bitter with burning on the tip of the tongue. In children we have burning vesicles on the inner side of the lips and apthae ulcers in the mouth and cheek, under this remedy.

The urine is passed a few drops at a time with burning at the orifice and the odor of onions fills the room.

There is pain in the small of the back, with a bruised or sprained feeling. The patient gets some relief in many of its symptoms from motion. After diarrhoea or fevers, there is a feeling of soreness all over the body like *arnica* or *rhus tox.*

Skin Symptoms.—Violent itching all over the body, with burning after scratching (*sulph.*), worse evenings and nights. Biting as from ants all over the body; worse evening and nights. Pemphigus of the hands, first pale then red. Corrosive itching where discharges pass over, as from urine and discharges from the bowels. Itching of the skin better by gentle rubbing.

FORMICA RUFA.

THE MENTAL SYMPTOMS of *formica* are few in number, but quite prominent. There is loss of memory, forgetfulness which is worse in the evening, and vertigo with reeling of the body. The aggravation is while eating and on rising from a prone position. Like *china*, a blackness comes before the eyes, which is better when sitting down. Like *nux vomica*, they often awake with a dull, sleepy, heavy and stupid feeling. There is confusion of the head with dullness, vertigo and pressure on both sides over the parietal bones. Morning headache with nausea and vomiting of bitter mucus in which it resembles *nux* again. It has a pressing or boring pain over the left eye, coming on a little earlier each day. The eyes feel as if there was sand in them, and they burn and itch in the morning, becoming worse when rubbing them; worse by washing. There is deep-seated itching and pain in the left ear; all parts of the ear feels swollen and uncomfortable.

Nose.—Sneezing, with an acute watery fluent coryza with pain in the vertex or left ear. Coryza fluent, corrosive, acrid and burning inside the nostrils. There is left-sided sore throat which is worse in the morning. The patient awakens with a very dry, husky, sore feeling in the throat; not infrequently they have a cold feeling in the fauces.

In the stomach we have acid eructations and nausea with bitter vomiting. Hunger at 9 a. m. Saliva tastes sweetish. Sensation of heat all over the epigastrium, with pressure in the cardiac end of the stomach.

Formica has a loose, watery stool with much flatus; tenesmus before stool and an uncomfortable burning feeling in the anus after stool. Again there is a painful desire with urging in the rectum even after stool. Constipation in small balls with constricted sensation in the anus. The urine is bright yellow or saffron color.

In the lower limbs there is a sensation as if the muscles were strained (rheumatism); also a sore, bruised pain in the hips which causes the patient to move frequently. Motion aggravates the pain, yet the patient desires it. The rheumatism of this remedy is usually confined to the joints, and is worse in cold weather. The patient complains of a tired feeling in the back, and has much lameness in the lower limbs.

Skin Symptoms.—Chilly, clammy feeling in the skin which awakens the patient. Much itching of the scrotum (pruritis). Lips dry, cracked and sore in the corners (*nat. mur.*); much itching about the anus, which is worse in the evening in bed (*sulph.*) and better by scratching. The itching is worse at 10 p. m. Great itching about the right nipple.

This remedy has burning in small spots on the skin, with a sensation of great pressure in the affected part. It cures the bad effects of bedbug or flea bites, when they swell and burn like urticaria. Compare it with *dulcamara* and *urtica urans* in urticaria.

Aggravations from cold, wet weather and cold bathing.

FERRUM.

THE FERRUM PATIENT is typically a tubercular one. They always have been since birth. They begin to show the ferrus expression of the tubercular taint more prominently about puberty and on up to the 25th year. Their circulation is so easily disturbed that they flush up and become red in the face on the least emotion. They are as children, bashful, timid and changeable in their dispositions. They are always blushing when meeting strangers or when embarrassed. They often speak of their face being hot while their extremities are cold.

Pallor is one of the key notes of ferrum. Pallor of the skin, of the mucous membrane, of the face, alternating with flushes. Farrington says, "They have irregular distributions

of the blood. Pale when quiet, flushed when excited." They have orgasms of blood to the face, chest, head, lungs; heart, and especially to the cheeks. The face is pale with a red spot on the cheek. They are peevish, tearful, fretful, disputive and contradictive. The lips, tongue, gums, and palatal arch look pale and anaemic.

In young girls we often see that waxy, death-like face, with bright eyes and long silken lashes, who are willful, fretful and contradictive. Later on as they develop into riper womanhood, they are apt to look chlorotic, cachetic and bloodless. The face is often the dial to these patients. Emotion flushes the face on meeting strangers, drinking wine or the slightest stimulant. The nose, ears, lips, fingers look waxy, and are cold to touch. The muscles are flabby and relaxed, with no strength or tone in them. Still later on we see them losing strength daily. They faint easily and tire soon. They are made better by moving gently about, in cool fresh air like *pulsatilla*. They often look well, but have no strength. They love to rest, to lie down and keep quiet.

H. C. Allen describes a ferrum patient as "pettish, disputive, easily excited and angered, contradictive and of a sanguine temperament." They have vertigo which is greatly aggravated by seeing flowing water, crossing a bridge, or walking over a river or stream and from descending (*borax*).

In their headaches they have sensations of hammering, pulsating or beating, coming on two or three times a week. These headaches are often due to the anaemic condition usually present in ferrum patients. They are often accompanied with congestion in the head, flushes of heat to the face or redness of the cheeks. They have a severe, dull, heavy feeling in the head in the morning, alternating with cold feet. The feet and hands are as cold as marble (*cal c.*). Pain in the parietal region often calls for *ferrum*.

The taste is sweetish or of blood; of blood usually during the menses (*phos., tub.*). Chilly all over with hands and feet cold and face glowing hot. Sensation of heat over the body which is cold to touch.

Menses.—Flow bright red accompanied with much flushing of the face (*ipéc.*). Face usually pale or sallow. In hemorrhages this remedy comes in between *china off.* and *ipécac.* The hemorrhages come in gushes, bright red, with or without clots. Occasionally we have a throbbing or beating headache accompanying the menses, with dyspnoea, rapid breathing and palpitation of the heart. In incipient tuber-

culosis the sputa is copious, putrid, purulent, greenish or frothy and scant. Early attacks of hemorrhage of bright red blood are followed by fainting spells (*incipient tuberculosis*).

Skin.—Great paleness of the skin, face flushes easily or is pale and ashy, jaundical complexion, dark blue rings about the eyes and circumscribed dark blue or violet-colored spots on the skin (*purpura*), and varicose veins during pregnancy. Skin dry, pale, waxy, or dirty looking, withered and flabby. Yellow brown spots on the skin which are sore to touch. Ulcers pale, oedematous in chlorotic individuals.

Aggravations.—12 a. m., from asthena. Worse while at rest, sitting still. Better walking slowly about and also better in summer. Worse fall and spring.

EUPHORBIIUM.

EUPHORBIIUM is a resinous juice or gum that is exported from Morocco. It is a powerful acting poison. It acts upon almost every tissue, even to the bones. In many ways it resembles *croton tiglium*, in others, *rhus radicans*, yet it acts deeper than either remedy. Sometimes *arsenicum* is its nearest similia, and this is especially true in cancer, carbuncle, erysipelas. In gangrene and in its ulcers it may assume a condition equal to *anthracinum*. It has *terrible burning as if a live coal were on the parts*, especially in cancer, malignant carbuncle, ulcer of the stomach, caries and necrosis of the bones. Its pains are tearing, burning and stitching; not infrequently the pains are much worse in the night and are confined to the bones. (*Mer. sol., amm., syphl., kali iod.*)

The mind is stupid and dull; vertigo, worse standing, with illusions of sight and hearing. Vertigo, with falling to right. Head aches as if pressed asunder, or there is a screwed sensation in the whole head. Head very sore as if beaten when pain ceases. The pain is worse in the morning or better by cold applications.

In the eye we have photophobia, dim or double vision. The lids feel dry and heavy and things seem to be too large and in variegated colors.

The face looks pale and sickly, even cachetic. Toothache is a very annoying symptom. The pains are dull, or sticking, or gnawing with that screwed-in sensation. The taste is bitter or foul and the saliva excessive, which has at times a salty taste. Accumulations of saliva with shuddering is another peculiar symptom in the proving.

Great hunger, with a sensation as if the stomach was lax and hanging down. Nausea and vomiting with thirst for cold drinks. Burning as of *coals of fire* in the stomach in gastric ulcers or cancer. The pain produces the anxiousness of *arsenicum*. The burning in the stomach may extend to the throat, causing hiccough, belching, or nausea and vomiting with shuddering. Patient feels chilly when he begins to eat. The pain is usually worse on the left side of the stomach, which is sore and sensitive after the pain ceases. The whole abdomen appears sunken (*camph.*, *verat. alb.*).

Cough constant; dry, hollow and with tickling in the chest and throat; worse nights. The stomach-cough seems to proceed from the pit of the stomach.

Skin Symptoms.—Scarlet red stripes or streaks on the left forearm. Eruptions dry or moist. Erysipelas phlegmonous or vesicular forms with much swelling or tumification. Erysipelas bullosa with eruption the size of a pea filled with a yellowish serum. Skin a dark reddish hue. Pain is boring, gnawing and burning. Erysipelas of the face, worse over the malar bone, with much burning and biting. Vesicles the size of a pea, filled with a yellowish-white serum and later on are covered with honey colored crusts. Violent phlegmonous erysipelas with great swelling and tumification which later on becomes gangrenous. Pustules exuding bloody water. The ulcers turn black and become gangrenous. Old torpid ulcers with biting or lancinating pains whose pains are worse in the morning and aggravated by heat (reverse *ars.*); worse on beginning to move.

Carbuncles in old people, with intense burning in them as if a coal of fire was on the affected part. A biting or burning sensation in the skin is characteristic of this remedy, or gnawing, biting, burning and itching. Great anxiety as if poisoned is another symptom often present.

FERRUM PHOS.

FERRUM PHOS. is prepared by mixing sodium phosphate with sulphate of iron. It is found in the coloring matter of the blood and hair. It is practically a new remedy, although we have had some provings of it as far back as 1875, yet the finer and more useful phases of the drug were not brought out until the latter part or beginning of the nineteenth century.

Schussler brought out many symptoms that gave us a better knowledge of its action. It is sometimes called the

new *aconite* of the materia medica, as it relieves so many acute congestions similar to those of *aconite*. The guiding symptoms speak prominently of its acute congestions, especially to the head; of its nose bleed, its red face, its hammering pains, etc.

Dr. Hemple, speaking of iron as a remedy, says, "Those living in the vicinity of iron springs are prone to pneumonia, haemoptysis, pulmonary phthisis, nose bleed and vomiting of blood."

Mental Symptoms.—Feels as if he needed a stimulant: a feeling as of letting down, inertia, loss of courage and hope.

Iron we know possesses the power of attracting oxygen, and through this power the *ferrums* are useful remedies in certain changes in the red blood corpuscles, such as anaemia, chlorosis, leucaemia, even if their basis are of a tubercular character.

There is congestion to the brain, lungs or any part of the body, accompanied with pain, heat, redness, swelling and rapid pulse. In eruptive fevers or inflammatory conditions, especially in young people or children, it vies with *aconite*, *bell.* and *gels.* It seems to come in midway between *aconite* and *belladonna*. It has not the intense restlessness and anxiousness of *aconite*, nor the drowsiness of *belladonna*. Its delirium and mania are more modified. In fever the face is flushed like *belladonna*, the pulse quick like *aconite*, yet we do not have the intense heat or the photophobia of *bell.* The pulse is softer, not so tense and hard.

In pneumonia the face is flushed and the patient sleepy and drowsy with a tendency to hemorrhages from the nose in young people. It has sharp pains in the lungs, and stitches in the sides like *bryonia*. It is frequently indicated in bronchitis, laryngitis, pleurisy and pneumonia. The chest in pneumonia has a sore, bruised feeling. The expectoration is scanty and often blood-streaked. There are sharp stitches in the sides which are worse on taking a long breath. The cough is hard, dry, short, tickling and often spasmodic with a huskiness, and more or less loss of voice. *Ferrum phos.* has a tickling cough beginning in the larynx like *rhus*. Pulse full, round but soft.

I have cured many severe cases of articular rheumatism with this remedy in brunettes, where the pain frequently shifted from one joint to another. The symptoms are painful swelling with heat, soreness and tenderness lasting three or

four days, which suddenly ceases, beginning just as suddenly and as severely in the opposite joint. The fever is high, face flushed, and there is much suffering and restlessness; the patient is aggravated by motion, and relieved by wrapping up warm. Nose bleed of bright red blood. Compare with *malilotus alb.* Frequent bleeding of the nose in children at puberty (*cal. phos.*). These children all have a tubercular diathesis. Nose bleed in adults relieves headache. The toothache is relieved by cold drinks and is aggravated by warmth. Toothache with fever and red flushed cheeks. Fever with flushed face and cheeks red, eyes glistening.

Stomach.—Acute gastritis; pain worse after eating; nausea, and vomiting of a sour matter which sets the teeth on edge. Stomach worse from eating sour things, meat, fish and coffee. Aversion to milk.

Diarrhœa.—Stools green and watery, mixed with mucus. Dysentery begins with high fever. Child sleeps with eyes half open, moans and complains all the time (*arsenicum*). Straining at stool often accompanied with retching and vomiting. Stools almost pure blood or green watery mucus mixed with blood. Aggravation from midnight until morning and from retention of urine in fevers of children.

Skin Symptoms.—Skin dry, hot in fevers. Much heat in the face. Capillary congestion with burning in the skin. Indicated in the beginning of scarlet fever, smallpox with violent fever, and cerebral congestion, also in erysipelas with intense fever and congestion, especially in tubercular children.





SPECIAL ARTICLES



EVILS OF THE TOBACCO HABIT.

BY J. W. HODGE, M. D.



HIS PAPER is the seventh in numerical order of a series of monographs on the evils of tobacco which the writer has contributed to leading medical journals and health magazines during the past year.

In previous articles of this series I have presented to my readers rigid proof of the evil effects which tobacco exerts on the health and morals of those who are addicted to the use of the narcotic weed. In the course of my writings on this drug-habit I have repeatedly challenged the tobacco-using doctors of medicine to present a single valid reason or any sort of logical argument in justification or defence of the filthy, degrading, wasteful and health-blighting habit to which so many medical men are slavishly addicted.

Although many thousands of tobacco-using doctors, preachers and pedagogues must have read my widely published arraignment of the Indian drug-habit to which they are hopelessly and slavishly addicted, not one of those narcotized professionals has evinced the temerity to make any sort of reply in defence of the pernicious tobacco-habit; and, for obvious reasons, never will make any. This sphinx-like silence on the part of the tobacconized doctors of medicine and the nicotinized ministers of the gospel when arraigned in open court is a tacit admission by them of the truth of my published statement that the tobacco-habit is utterly devoid of a single redeeming feature to recommend or condone it. There is no more justification for tobacco-using than there is for opium-smoking or "booze-fighting," and the doctors know it and by their stolid silence have admitted it. Ruskin placed the seal of his condemnation on the Indian weed in the following scathing language: "Tobacco is the worst natural curse of civilization." Tobacco being the most virulently poisonous plant which Nature produces, Ruskin's statement is correct. Ruskin's language is none too strong to be literally and absolutely true. In view of this fact it is

deplorable that medical men, as a class, are so generally addicted to the tobacco-habit. Doctors dishonor their profession by being largely instrumental in spreading this loathsome and demoralizing practice among the youth of our land. Every doctor who is seen smoking on the public streets pleads guilty to the moral offense of setting a vicious and an infectious example before young boys. Were medical tobacco-fiends to seclude themselves within the confines of smoking-dens, opium-joints or bar-rooms whilst indulging in their filthy, disgusting trick of sensual gratification, as Chinamen are wont to do when smoking opium, our innocent boys would be spared the demoralizing spectacle of professional tobacco-fiends drugging themselves on the public streets and in public places with a stinking, loathsome, narcotic poison. If the drug-doctors continue their present practice of appeasing their debauched appetites by doping themselves with nicotine and "booze," their clients will be obliged to seek medical aid from Christian Science practitioners and other drugless healers to whose lasting credit be it said that they do not use tobacco or "booze" themselves nor prescribe any of these poisons for their patients, but do, on the contrary, positively proscribe their use. While not an adherent of the Christian Science faith, nor a believer in the theological tenets of Eddyism, I should, nevertheless, prefer the service of a Christian Science healer in time of sickness to that of any "regular" drug-doctor who is addicted to tobacco or "booze." To me it is not at all surprising that the clients of the "scientific" drug-doctors are leaving them in large numbers and turning to Christian Science healers for relief which they have sought in vain from the practitioners of the drug-prescribing school of physic.

In preceding papers of this series, I have pointed out some of the demoralizing effects which the use of tobacco is wont to induce in its devotees. One of the worst of the evils which follow the use of the narcotic weed is the utter indifference, carelessness and callousness which it invariably engenders in its addicts toward the rights and comforts of abstainers from the weed. Soon after having taken on the tobacco habit smokers become so demoralized by the effects of the nicotine as to lose all those nice considerations for the rights and comforts of others which mark the true gentlemen in all the relations of life. Prof. Meade of Oberlin College, who has studied the effects of tobacco upon the students of that institution, says: "The tobacco habit tends

to deaden the sense of honor as well as that of decency, and none are more likely to practice deception unscrupulously than those who use the weed."

A scrupulous regard for the rights and comforts of others is an essential attribute of every real gentleman. Nothing more forcibly demonstrates the demoralizing influence of tobacco upon its devotees than do the callousness and reckless indifference which it generates in this respect. The tobacco habit is the bane of good manners. A few years of its servitude suffice to annihilate the gentleman in every smoker and chewer. The smoker soon learns to think of himself alone and to ignore the possibility of offending others by constraining them to inhale the nauseous and irritating fumes from his stogie or cigar. Confirmed smokers are wont to evince no more signs of courtesy or politeness than do the beasts of the fields. The tobacco-fiend puffs his clouds of stinking smoke into your face, caring not whether it makes you miserable or happy. In this degenerate age of tobacco-debauched men, waiting rooms, convention halls, restaurants, court rooms, department stores, banks, postoffices, churches and other public places reek with the acrid and irritating fumes and the stench of cuspidors bespattered with tobacco spittle.

The *London Times*, in commenting on the evil influence exerted by tobacco upon the morals of its addicts, has this to say: "The indifference or apathy with regard to the rights and comforts of others is one of the most remarkable effects of tobacco. No other drug produces anything to equal it. The tobacco smoker does not wish you harm when he blows a cloud of nicotine into your face. He doesn't care whether it makes you miserable or happy. Perhaps in no other respect are the laws of good breeding so often and so grossly violated as they are by the smokers and the chewers of tobacco. The filthy splashes on the sidewalks, on the floors of convention halls, courthouses, postoffices, and other public places are a disgrace to civilization."

The above quoted indictment of the tobacco-habit as it is found in England is equally applicable to the conditions which we find in America. The conspicuous public notices posted in the cabins of steamboats, in the waiting room of railway stations, in restaurants, dining halls and other public places, to prevent smoking and spitting in the presence of ladies, convey a severe reproof to all who use the malodorous weed. The fact that it is necessary to post in public places

prohibitive warning, such as "No Smoking," "Men will please not smoke," "Smoking Not Allowed," "Smoking Strictly Prohibited," etc., shows that smokers are so devoid of common decency and so destitute of all sense of honor and consideration for the rights of others that it is necessary to publicly forbid their filthy and abominable practices in all places to which they gain access. Even this precaution is not always effective in prohibiting the filthy tobacco nuisance.

It is no uncommon occurrence that reckless smokers break over all restraints, expressed or implied, and insist in plying their stinking pipes and cigars in the face of these public prohibitive notices. No motives of consideration for the rights or comforts of others will restrain the male devotee of tobacco from plying his stinking stogie, cheroot or cigar in the presence of ladies and children to whom tobacco smoke is known to be particularly offensive and injurious. In this era of tobacco-debauched men, lady pedestrians find it well nigh impossible to venture out upon the public streets without being subjected to repeated whiffs of filthy tobacco smoke from the cigars, cheroots, cigarettes, stogies and stinking old pipes which protrude from the jaws of the hordes of male tobacco smokers, both black and white, who perpetually infest the public streets, pollute the common atmosphere of our cities with clouds of nicotine and besmear the sidewalks with foul splashes of tobacco spittle.

A lady recently complained to the writer that every time she went out to do her shopping during the holidays her fur coat became so saturated and scented with the stench of tobacco smoke that she was obliged to hang it outdoors for an airing in order to deodorize it before she could again wear it. She further remarked: "Were I a tobacco-fiend myself, my garments could hardly smell stronger of smoke than they now do when I return from shopping in the stores." What a delightful state of affairs, this, in a "civilized" community of "human" beings! The stench from burning tobacco is probably as offensive to the nostrils of nearly all persons who are not addicted to the use of the malodorous weed as is any stench under "heaven." Yet such is the tyranny of custom and the overwhelming prevalence of this social vice, that clean persons tamely tolerate this filthy and abominable nuisance by which they are everlastingly pestered at the hands of boorish and ill-mannered tobacco-fiends who are pleased to style themselves "men." Tobacco-skunks who

persist in ignoring the rights of ladies and of the general public, should be arrested, "run in," segregated and confined within the walls of smoking dens, opium joints, barrooms and other such like resorts, while engaged in their stink-making Indian diversion of doping themselves with nicotine, so that they may not be permitted to outrage the nostrils of clean persons with their filthy and abominable practice.

Why it is that refined ladies, young girls and children must be forcibly subjected on the public streets of our cities and in public buildings to the gross indignity and positive insult of having tobacco smoke puffed into their faces by human pole-cats of the masculine gender, is one of the unanswerable questions. As a means of self-defense, ladies and other abstainers from the malodorous Virginian weed should organize anti-tobacco leagues for the purpose of putting down this outrageous imposture which is being everlastingly inflicted upon clean, decent citizens by tobacco-debauched fellows who claim to be men.

Smoking is universally conceded to be an impolite, offensive, disgusting and demoralizing practice. Some cities have become sufficiently civilized to enact anti-smoking ordinances which proscribe smoking from all public buildings, public places of business, and from the public streets of said cities. Every enlightened community should pass such laws and rigidly enforce them. Nothing is more outrageously offensive to ladies and children than to have tobacco smoke blown in their nostrils as they pass along the public streets. The pestiferous tobacco-skunks should be summarily placed under the ban. They are not fit animals to run at large in a community of civilized people. The tobacco-skunk outrage should be put down by the strong arm of the law.

THE USE OF TOBACCO A CHRISTIAN VICE.

The habitual use of tobacco and strong drink has become so popular with and so universally prevalent among the Jack-members of every Christian community throughout the world that these twin evils may be properly regarded as being essentially and distinctively Christian vices. In his writings Sir Frederick Ley has recorded the following observations: "While in camp not far from the city of Bombay, I visited a number of villages inhabited mostly, if not entirely, by people who called themselves Christians, and I was shocked to find that those villages were simply drowned in drink and choked with tobacco smoke."

Reader, where will you find a Christian community in America whose male members are not steeped in tobacco and debauched with the liquor traffic? A sad commentary on the Christian church is found in the deplorable fact that a large number of Christian clergymen are slavishly addicted to the degrading tobacco habit. Christian nations are notorious for their enormous consumption of tobacco and "booze." In the United States of America, alone, more than one million dollars are expended every day of the year for the purchase of tobacco, and several times that amount for "booze." Alcoholism, nicotinism and carnivorism constitute an infernal trinity of cognate vices which curse every Christian community in the world. Is it not time that the people who profess to be followers of "the meek and lowly Nazarene" who preached the gospel of "peace on earth and good-will toward men," throw off these barbaric and degrading customs which are degenerating the human race in every Christian country?

History tells us that the loathsome tobacco habit was adopted by Christian men from the savages of the forest, called North American Indians. Carnivorism or corpse-eating, another relic of barbarism, probably came from the same or a similar source. How long will people calling themselves Christians continue to follow in the wake of the primitive savage of the forest by debauching themselves with tobacco and gorging their stomachs upon the corpses of their murdered fellow beings, "the lower animals?"

THE USE OF TOBACCO DIMINISHES EFFICIENCY.

Jay W. Seaver, A. M., M. D., medical examiner of the Yale University gymnasium, writes: "Whenever it is desired to secure the highest possible working ability by the organism, as in athletic contests, where the maximum of effort is demanded, all motor-depressant influences are removed as far as possible, tobacco being one of the first substances forbidden."

All trainers engaged in preparing contestants for athletic feats appreciate the vital importance of prohibiting the use of both tobacco and liquor by their charges. An athlete's training is given him for the purpose of increasing his strength, agility and endurance. His trainer, therefore, insists that he leave tobacco and liquor alone. Were it possible to banish the use of tobacco and "booze" from the society of men we would soon see a superior race of human beings.

Tobacco, being a virulent poison, causes depreciation

of the nerve cells and deterioration of the nerve force. It reduces vitality, diminishes muscular agility, impairs endurance and leaves man's physical organism less responsive to his will than it would otherwise have been. Tobacco is antagonistic to everything which goes to make up true and independent manhood. No man while using the weed can be at his best, physically or mentally. The time is already at hand when tobacco users are being barred from responsible positions which demand quick and accurate thought and action. The United States Steel Corporation has forbidden the use of tobacco by its employes during the hours of work and expresses its decided preference for the services of men who are total abstainers from the weed. Several railway companies have similar rules in operation. Every athlete knows that smoking "hurts the wind," that it impairs the ability of the heart to respond quickly to extra work. The narcotic also affects the precision of the eye and hand. A great billiard player who does not use tobacco declares that he always feels certain of winning whenever he finds that his opponent is a smoker. Riflemen and sharpshooters know that the marksmanship of non-smokers is more accurate than that of smokers. A famous tennis player who took on the habit of smoking when he reached the age of 21 years, found that men whom he had previously defeated with ease could now easily defeat him. The use of tobacco diminishes efficiency in every department of human endeavor.

THE EVIL EFFECTS OF TOBACCO ARE TRANSMITTED TO THE
OFFSPRING OF ITS VICTIMS.


In former papers I have called the attention of my readers to some of the physical and moral evils produced by the use of the poisonous weed. Tobacco produces mental weaknesses and physical defects which are transmitted from parent to child. The Dublin University Magazine, commenting on this phase of the tobacco evil, says: "Fortunately for us, the vice (tobacco habit) is almost entirely masculine. If the daughters of England were to commence weakening their vital forces by the use of nicotine, we should find the children of another generation with a hereditary taste for poison, and a diminished power for resisting its inroads. They would be dyspeptic, unhealthy and nervous."

A news dispatch in a recent issue of *The Evening Sun* of New York says: "When the International Congress of Hygiene and Demography closed its session in Washington,


D. C., recently (September, 1912), it left placards hanging on the walls of its convention hall which declared that 'the use of tobacco makes weaklings of its devotees and of their children.' On one of these placards was this inscription: 'Tobacco users are not fit progenitors.' On another card found on the wall of the convention hall were the words: 'Tobacco is the most poisonous plant that grows, the smoke being as poisonous as the leaf.' Thus did the International Congress of Hygiene and Demography place the seal of its condemnation on the tobacco habit. All physicians who are not themselves victims of the tobacco habit, and a large number who are, deplore and denounce the pernicious practice in the strongest terms. J. M. Peebles, M. D., A. M., Ph. D., the distinguished author, scientist and physician, in his writings on tobacco uses the following language: "Using tobacco in any form, smoking, chewing or snuffing, is a morally vicious habit. The weed has not one perceptible redeeming quality. It is expensive, stinking the breath, the clothing, the room; yellowing the skin, affecting the heart, parching the membranes of the throat and shortening life. Tobacco prevails extensively now in all Christian countries, and it is not only a nuisance but a filthy poison." Any medical man who should seriously attempt to justify the tobacco habit or any other drug addiction would be justly regarded as a lunatic by intelligent and civilized persons. Any father who should teach his boys to smoke or chew tobacco would be considered a degenerate and a monster. But this is just what every tobacco-using father is doing by setting a vicious and degrading example before his own sons or those of his neighbor.

Niagara Falls, N. Y., December 25, 1912.





CONTRIBUTED



A REPLY TO THE CRITIQUE'S CRITIC.



FEW MONTHS AGO THE CRITIQUE announced that it was fortunate enough to acquire the services of Dr. G. E. Deinst, of Aurora, Ills., as associate editor. This, no doubt, was read with considerable interest and I presume its readers looked forward in anticipation of something good from the doctor's pen. The doctor stated in his maiden editorial, that this is a "Critique," and that he would devote some space to criticism; this, from the recent numbers, appears to be his stock in trade. He states he is also in perfect sympathy with the motto, "Homoeopathy Militant," believing, as he asserts, that wholesome belligerency is now imperative. This method of attack, in the writer's opinion, is rather a peculiar one. Medical journalism, if successful, needs constructive, not destructive editorials; most any one can find fault and try to criticize, but unless he can offer something better it amounts to mere balderdash. If this method appeals to the doctor as being worthy of countenance and inspiring to his readers, we believe he has another guess coming.

The first article from the "critic" was entitled "A Strange Appendectomy." One could scarcely tell after reading said article whether the writer was trying to be funny, or really believed what he said. However this may be, it certainly would have been better if never published. In the next issue the "critic" was very much chagrined because a Minnesota doctor cured a case of rheumatic purpura with lachesis, 6-x., and did not give all the details of the case. He seemed greatly disturbed over the results of the case, even though cured, because he is not sure that it was a homoeopathic cure, which is the only method of cure, he says.

Blood poison is then discussed. The "regular" who consulted the doctor being criticized for curetting the sores and giving iron and quinine internally for the usual symptoms. Although the condition mentioned is rather indefinite, I take it for granted that it was a plain case of infection, with the

usual symptoms, and if the regular had known what caused the infection, he would not have bothered with his septic curette, but dressed the infected parts antiseptically, made the necessary incisions, and if not too long standing, would not have needed any other treatment. This is scientific treatment. If some poor homoeopath, to quote the doctor, had seen the case and relied entirely upon the internal remedy, he, too, might be held criminally negligent, as such treatment is a relic of the past. The particular and peculiar symptoms are practically always present in cases of infection, going from room to room, bed to chair, etc., does not call for *arsenicum* so much as it calls for an *incision*; perhaps drainage and a hot antiseptic dressing; if this is done at once the patient is well in three or four days. This, I repeat, is scientific treatment, but it seems there are yet some doctors who do not know a surgical from a medical case. Read "the selection of the remedy" again, doctor. Our "critic" then proceeds to recite a case for example of incomplete or unsatisfactory urination, a very frequent condition indeed; he says there are some twenty-nine remedies that may be indicated in this troublesome condition; in the meantime he doesn't mention what may be the cause of this incomplete urination, whether from cystitis, ulcer of bladder, enlarged prostate, Bright's, rheumatism or tuberculosis of bladder or kidney, gonorrhoea, stone in the bladder or prostate, or bacteriuria. This cuts no figure in the doctor's mind—he's a thorough homoeopath, he is; he doesn't have to know anything about the cause, it's the peculiar and particulars he is after, and unless you get these peculiars and particulars you cannot possibly effect a cure. Now let us suppose it may be a case of bacteriuria, which very often occurs; we may find that clematis, cantharis, cannabis, hepar, etc., to be indicated, and they will help somewhat, so will hygiene and diet, too; but we should not mention these, we Hahanemanians. Sometimes while you are hunting for the peculiars and particulars in these cases, the patient gets weary and goes to another doctor and he diagnoses the case one of colon bacillus infection, gives urotropin and cures at once. Not homoeopathic, you say? No, just bactericidal treatment, and it cures. *Similia* is a law of cure, but there are others. Should the incontinence come from a stone in the bladder, or prostate, or caused by an enlarged, fibrous prostate, etc., all of which will cause an unsatisfactory urination, you may give any, or all, of your twenty-nine remedies with very little

effect, peculiars and particulars notwithstanding. Hahnemann said: "The highest aim is a speedy, gentle and permanent restitution of health, or alleviation of disease in its entirety, in the shortest, most reliable and safest manner, according to clearly, intelligent reasons." Do you not think, doctor, that it would be a saving of time and a quicker relief to first find the cause of the incomplete and unsatisfactory urination before spending too much time running down the symptoms of the twenty-nine remedies? Doubtless you do not, as you did not mention the fact. There is no excuse in these days of enlightenment to waste time trying to cure such cases as last mentioned with medicine, when we know it will not do it. My paper entitled "Selecting the Remedy," was written to counteract just such flabdoodle as this. It is just such nonsense that casts ridicule upon homoeopathy in general and enough to make the founder turn in his grave, were it possible. "Selecting the Remedy," published in the October CRITIQUE, disappoints the "critic" very much, even after reading it twice. It failed to tell, he says, how to select the homoeopathic remedy. This subject has been written and talked upon until I think nothing more can be said that would be of much interest to any one except the veriest tyro. The writer believes that there are conditions that call for treatment other than the homoeopathic, consequently emphasized the fact, but he does not hesitate to give the homoeopathic remedy if indicated. *Similia Similibus Curanter*, is a law of cure, but not the only method. Some, it appears, do not know this, but I believe the majority do. Those who do not have any use for dietetics, hygiene, exercise, mechanotherapy, etc., in the treatment of disease are walking in a very narrow path. The physician who does not understand or recognize the cause and effect of bacteria, is a back number and, of course, we cannot expect him to believe in hygiene and prophylaxis, as they are closely related. The doctor seems to think that no physician can be a homoeopath should he say or think anything but the indicated, single remedy. While I recognize one cannot know too much of the law of similia, I also recognize it is not all there is in medicine, and any physician who does not recognize and familiarize himself with the allied sciences, is only partly prepared for practice.

Hahnemann recognized that there were other things necessary to the physician's equipment besides being able to choose the correct remedy. The A. I. H., according to their definition of a homoeopathic physician, recognize it too, and

it is time the rank and file recognize these subjects, if the homoeopathic profession expects to retain the respect and confidence of the public. Our "critic" was considerably concerned over the fact that my paper would have such a bad effect upon the young physician. Whether this be true or not, I am unable to say definitely, but do not believe it will lead them to commit any very serious blunders. In fact it was written to prevent just this thing. Our "critic" may think this a wholesome belligerency and that he is strengthening the cause, but I would suggest before he takes himself too seriously as a "critic," that it would be well for him to inform himself upon the allied subjects of medicine before he undertakes to bore the profession with his ancient ideas, for there is no one, who claims to know his business, that will countenance any such nonsense. In regard to the impression he wishes to make upon the young man in the profession, he need not feel too much concerned, for no recent graduate of any efficient school would for a minute, in my opinion, countenance such puerile, commonplace and egotistic utterances.

J. B. BROWN.

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ASSOCIATE EDITOR'S CORNER

SOME ELEMENTS IN TUBERCULOSIS.



OUR MINDS ARE ENGROSSED with the thoughts of the white plague. Plans are constantly introduced to cure its ravages. Hospitals built, tent colonies created, diet is suggested and exercises are prescribed to care for and modify the tubercular and the destructive effects of tuberculosis. These things are all good as far as they go. Other things are necessary in the meantime. Very often we begin at the branches when we should work at the root; instead of quenching the fire of disease we are in very many instances adding oil to the conflagration.

There are two points very common today in the etiology of tuberculosis, which are forgotten or unknown and which are the things where oil is added to smouldering flames. These two points are not new. Many thoughtful physicians have seen them and are doing noble work in preventing their continuance. While this is true, it is also lamentably true that the great majority of physicians of today are producing blindly what should be avoided; the laity should be taught in unmistakable language the dangers they are courting by following the practice of so many physicians, drug stores and makers of proprietary remedies.

The two points which we refer to as playing a disastrous role in the etiology of tuberculosis are the suppression of headaches and skin eruptions. I desire to emphasize with all the power of my soul the fact that many of the headaches met with today, no matter by what particular name they may be called, are tubercular in their nature. This is particularly true in young people of excitable natures, and who on the slightest mental excitement or exertion have headaches. As long as they have these headaches they do not show any very marked symptoms of tuberculosis; for these attacks of pain in the head are but miasmatic explosions which relieve the system for a brief season of a heavy burden. Suppress these headaches, however, with coal tar or other suppressants, or maltreat these headaches by depleting the vital forces by repeated cathartics, which can be done by repeated doses of

headache powders and saline draughts, and though you palliate the pain in the head you develop pulmonary phthisis. Those of you who have been thoughtful and careful observers have seen whole families suffering from periodical headaches of an apparent nervous type. On tracing the history of disease in these families you will have discovered a vein of tuberculosis in some near relative or relatives, and when these headaches are suppressed you soon have one after the other die of tuberculosis. Indeed so prevalent are these things that in the life of a busy physician these observations are almost of daily occurrence. Here then is the point: since this is true and the suppression of headaches becomes one of the leading factors in the cause of tuberculosis, why suppress a headache? Where is the philosophy? Where is the justice? What good are we doing our fellow mortals if, by hushing one group of symptoms, we cause another group of infinitely more serious symptoms? But it is done. Physicians in their practice, or druggists in their business over the counter, proprietary houses in their circulars, are doing more to cause a disease than it is possible for the rest of humanity to prevent. You say this is severe. Very well, it is meant to be severe. You ask for proofs? I ask you to prove the contrary. From a list of hundreds of cases we have seen many startling evidences of the awful devastation from suppressive measures, and suppressing headaches is a prolific cause of tuberculosis.

Our second point is in reference to the suppression of skin eruptions. It matters not what name may be given the eruption, it is but an external expression of an internal disorder unless caused directly by external influences, such as accidents, cuts, burns, bruises, etc. Systematic eruptions come from the inside. Nature forces certain diseases to the external covering of man because the internal organism refuses to entertain the disorder. To cure them they must be cured from the inside. Nature must have assistance to force the enemy of health to the surface until it ceases for want of power to produce visible evidences of its presence on the external man. This is not done. The laity is taught to look upon this as a mere skin diseases; that is, a disease at most only skin deep and independent of any internal influences. To cure it local measures are employed. Salves, ointments, baths, lotions and many other things are employed to "heal," dry up, hush, smother, quiet or remove the unsightly pimple, pustule or eruption of every nature. When the application

is sufficiently astringent to hush the eruption at one place, and nature is strong enough to refuse it admittance to some internal organ, this eruption is forced to reappear, in course of time, at the same place it appeared before, and when this is not done it will appear on some other part of the surface of man.

Suppose, however, as is so often fatally true, that nature is not strong enough to reproduce, on the surface, a suppressed eruption, what is the result? This eruption will manoeuvre for some internal base where it may establish its headquarters. This may take years. The fight may be fierce and strong, but without assistance nature succumbs to the constant bombardment of this enemy of health, forced to take up its headquarters in the inner citadels of physical economy. This enemy is shrewd, he is subtle, he selects the point of least resistance and there begins his work of destruction. The lung tissues are the most susceptible to the ravages of suppressed skin eruptions, and if there is a single spot where the power of resistance is below par, here it is where the suppressed eruption will begin its work. Once started it begins to deplete the vital forces, nature's most efficient army against disease, and as these forces become weaker the point of attack is enlarged until the entire lung is a mass of tubercles or tubercular ulcers, and then it is too late to reinforce nature sufficiently to remove the enemy and death must result from the onslaught.

In proof of this fact cases can be multiplied without number to show the truth of the above simile. Then why, Oh! why, are men who, high in the profession of medicine, constantly producing that which they are supposed to heal? Why force a curable disease into an incurable one? Why deceive our neighbors by pretending to help them when we are but destroying them? Is it not an awful picture? Is it not high time that the world—men everywhere in the profession and among the laity—is awaking to the awful state of affairs existing with reference to the white plague and begin at the proper place to correct it?

These are but two points of many that might be raised. What of suppressing nasal discharges, gonorrhoea, leucorrhoea and kindred secretions.

Wake up, brethren; arm yourselves for the battle. Begin at the beginning when the enemy is still weak and easily controlled. Treat the headaches from the inside. Remove the causes of the headaches instead of hushing them. Attack

the skin eruptions from the rear—from the inside—and do not heal them except from a genuinely curative standpoint. Humanity is sick, hence the headaches and eruptions. Do not increase this sickness by forcing it to remain inside. Drive it out. Compel it to depart. Relieve man of his heavy burdens and you will have done much to prevent the progress of the dreadful plague so destructive to life and health.



APPLICATION OF PRINCIPLES INVOLVED IN THE LAW OF CURE.

ASSOCIATE EDITOR'S NOTE.—*We are not inventors, we are discoverers. All existence is a divine thought. Nature in all its operations works in perfect harmony where not disturbed. The Creator made it so. Physiological economy is controlled, in all its detail, by unchanging laws. Violate these laws and discord results. To correct this discord the Omniscient mind has given mankind certain unalterable laws. These laws are being revealed, or perchance discovered—and their application is being taught, and a seal of approval is placed upon their proper use.*

Dr. W. E. Ledyard, of San Francisco, presented some phases of the application of this law to the International Hahnemannian Association in 1894, and we have enjoyed it so much that we repeat below, in part, what the Doctor has said.

IN MECHANICS it is necessary that a steam engine should be provided with one or more safety valves, in order that there may be a suitable vent for any high pressure of steam.

Nor is it alone necessary to have safety valves; they must be flung widely open whenever the steam pressure demands it.

It is, of course, unnecessary to remind you that high pressure of steam with a closed safety valve means a burst boiler.

In the "human form divine" we have a wonderful contrivance, bearing a close analogy to the safety valve.

This contrivance Hahnemann has ascribed to *the action of the vital force*, and upon this alone we depend for the opening of all the safety valves of the body.

As in the engine the vents are on the surface, so in the human body they are on or near the cutaneous and mucus surfaces.

As in the engine, the opening of the safety valve, by allowing the free escape of steam, removes the pressure and prevents the explosion and consequent destruction of the boiler, so in the human body the action of the vital force relieves the system of the internal disease by—

- (a) Eruptions, ulcers or discharges from the skin.
- (b) Discharges or exudations from the mucous membrane.
- (c) Cough and expectoration.
- (d) Paroxysms of chills and fever, etc., etc., etc.

The suppression of the eruption, discharge, exudation, cough, chills and fever, etc., etc., *is equivalent to closing the safety valve*, and, consequently, never takes place without endangering the health, and frequently the life, of a patient.

An eruption is usually suppressed by some external application incorporating a powerful drug in a crude form, *e. g.*:

An ointment or lotion.

A discharge from a mucous surface by an injection.

An ulcer by cauterizing.

A cough by mixtures containing opiates.

A chill by quinine.

Pains by sedatives, etc., etc.

Some of the effects of closing the safety valves, *i. e.*, of suppression, are quite evident, but many do not show themselves for some time, it may be for years.

We have asthma, epilepsy, paralysis, inflammation of the brain, lungs or other parts, etc. What we have said so often before, we now repeat, "Hands off the safety valves." "Keep them well open and assist the vital force in its effort to throw off the disease."

Not to presume to teach something already known, nor to pretend to any originality, but with the desire to enforce, if not to inculcate, upon the young and upon the thoughtless of maturer years, one phase of a great truth, allow us to report a few cases to explain the use of the human safety valve.

CASE 1—ASTHMA FROM SUPPRESSION OF SCABIES.

A girl, years before she reached the age of puberty, had "the itch."

To "cure" her, her mother soaped the whole surface of her body well with green soap, a German preparation consisting of caustic potash and flax seed oil.

The eruption disappeared and the natural inference was that the disease was cured.

Not long after this, however, her breathing began to be somewhat difficult. This difficulty gradually began to increase, until it began to develop into paroxysms of asthma, ever growing more severe.

Under these circumstances life became a burden, and like many thousands of other like sufferers, similar to a drowning man who clutches at a straw, she sought relief from the so-called "asthma cures."

We have treated this case for a long time, frequently emphasizing the fact, as we consider it, that the treatment cannot have the desired effect until the "asthma cure" has been dropped. Her particular weakness in this line is "Shiffman's," and if any one of our readers know its constituents, we should feel grateful if they would make them known.

An attack is now excited by anything that calls forth a little exertion or that interferes in any way with respiration; undressing or walking up stairs, inhaling the smoke from frying meat. The asthma is also worse after eating; also during the monthly periods and when pregnant. In these latter conditions the vital force is making its greatest effort to restore the lost equilibrium.

The patient is now thirty-five years of age, and is the mother of three children.

In this case the eruption constituted the safety valve, flung open by the inherent power of the vital force.

The suppression of the eruption by the green soap was equivalent to the closure of the safety valve.

In all probability the *modus operandi* is somewhat after this fashion:

The safety valve through the cutaneous surface having been closed, kind Nature, in order to prevent the explosion of the boiler, which, in the case under consideration, means death, throws open another safety valve through the lungs, in the form of cough and expectoration, which we may call the substituting safety valves.

These depend chiefly upon the healthy action of the respiratory muscles.

An interference with this, *i. e.*, any obstruction to the opening valve, will be promptly resented by nature, and the effectual effort to re-establish the cough and expectoration precipitates an attack of asthma.

For as the patient improves, cough and expectoration assert themselves, the former being frequent and the latter profuse; in other words, the safety valve is reopened.

This conservative action is also shown in the above case by a *persistent leucorrhoea*, and, occasionally, by a slight eruption on the skin.

The treatment has been partially successful.

The remedy called for by the suppression, and by the totality of the symptoms, *sulphur*, has been administered in single dry doses, followed in due time by a few doses of the same potency in solution, usually an hour apart, of the 200th, 500th, 1,000th, 6,000th, 81,000th, 500,000th, millionth and 20-quintillionth.

Phosphorus has been given successfully several times for acute attacks of cough with tightness across the chest, aphonia, etc., usually a single dose of the 200th, dry, or a few doses, hourly, in solution.

While the suppression is completely overcome, the cough, expectoration and leucorrhoea, together with the asthma, will disappear.

CASE 2—NASAL CATARRH.

Daughter of case one, aged seventeen years and seven months, leucophlegmatic.

First menses at fifteen and one-half years. For the two years that have elapsed since then, has menstruated only at long intervals—once going as long as six months—until lately the interval has been only six weeks.

Has been subject to nasal "catarrh" for years. It commenced to manifest itself sometime before the onset of puberty.

The discharge from the nose consists for the most part of tough, greenish plugs, with a horribly offensive odor, reminding one of stale green corn.

The plugs are gradually becoming smaller, and are less frequently discharged, while the horrible fetor is less intense. *The general health is good.*

In this case it appears evident to us that, if any local measures were resorted to, suppression of the catarrh would take place, and, without doubt, asthma (to which we have shown an hereditary tendency) would result.

The fact that her general health continues good goes far to prove that a cure will shortly take place.

The principal remedies used in this case, all highly potentized, were *sepia*, a few doses of *pulsatilla*, and *sulphur*.



DR. FREDERICK A. FAUST
COLO. SPRINGS, COLO.

FIRST VICE-PRESIDENT COLORADO HOMOEOPATHIC SOCIETY, AND PROM-
INENT A. I. H. MEMBER.



EDITORIAL SECTION



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No attention whatever will be paid to contributions which do not bear the name and address of author.

Do not send us material for publication written on both sides of the paper. Write plainly, spell correctly, be particular about capitalization and punctuation.

The Editor will be in no way responsible for the opinions expressed by individual contributors.



OLUME TWENTY. With this issue THE CRITIQUE enters upon its twentieth volume and takes pleasure in extending heartiest felicitations of the holiday season. Twenty years is a long time for *any* publication to exist, let alone a medical magazine, and the very fact of its having continued uninterruptedly for that period places THE CRITIQUE in a class distinctly by itself; if not thus segregated, in a class composed of other creditable journals that are here today simply because they have done something worth while.

Our readers and friends may look forward confidently to a continuation of our contentions for everything *homoeopathic*; homoeopathy in public places as well as private practice; separate examining boards for homoeopths and other aggressive measures calculated to continue homoeopathy on the map, as well as keep its adherents upon their mettle. Although our cover page designer inadvertantly omitted our "motto" from the general scheme, this does not indicate any inclination on our part to be less militant in our methods.

In our associate editor, Dr. George E. Dienst, we have a host within himself. He has assured us of loyal and liberal contributions during the forthcoming year and our patrons may form a pretty clear idea of what that means by past performance on his part. He will, no doubt, confine his attention to analyzing current thought on medicine and dissecting some of the cadaverous ideas which find their way into print and public discussion. Incidentally we doubt not

his determination to make "With the Associate Editor" a pleasant diversion.

Dr. J. Henry Allen will write regularly upon some materia medica topic, besides supplying other interesting material. 'Nuf sed.

We shall endeavor to keep our eastern friends thoroughly informed regarding interesting features connected with Colorado, that those contemplating attending the forthcoming session of the American Institute of Homoeopathy may make plans as far in advance as desirable, at the same time rely upon our columns for every feature calculated to make the combination of business and pleasure in this event wholly dependable. Nothing in the nature of unreliable information will be permitted space in these pages.

We look for a large meeting in June and believe the profession of the city will work hard to make it a success from every viewpoint; that the citizens of Denver and Colorado will extend the glad hand to our guests and that in the future the 1913 meeting of the A. I. H. will not be said to have *gone down* in a blaze of glory, but will ever remain vividly in the minds of all as being one of the "best ever."

But that is getting away from the subject: Here is wishing success and prosperity to "Volume Twenty."



OUR PICTURE GALLERY. We take pleasure in presenting Dr. Frederic A. Faust's picture to readers of THE CRITIQUE and to assure them it is a very correct likeness of our esteemed cotemporary located at Colorado Springs, and to assure them further he is upholding the homoeopathic banner in his locality to the everlasting credit of the profession.

Dr. Faust was elected first vice-president of the Colorado Homoeopathic Society at its last meeting, and one of the out-of-town members who was not deterred from attending this society's sessions on account of the "weather;" he attends the Institute pretty regularly and is deserving recognition by this organization.

Dr. Faust suggests, in a letter to editor of THE CRITIQUE, that we endeavor to induce the profession of Kansas and Nebraska to join us in entertaining the Institute, thus increasing our strength, numerically, as well as giving those in a locality unable to entertain the Institute locally, an opportunity to show their loyalty to the cause by participating

in the program from a personal standpoint. It is a good suggestion which would reflect credit upon those in charge of arrangements if acted upon favorably.



MORE FOOL MEDICAL LEGISLATION IN THE MOULD. Colorado has been cursed by a constant endeavor on the part of either medical men or members of the laity to place upon our statutes, perennially, more different brands of fool medical legislation than may be found in any other state in the Union. About the fooliest of all the fool stuff so far submitted is the following, which is deserving of more than *special mention*:

"Let that appendix alone, doctor!" This is what the next legislature will say to the doctors of the state if a bill now being considered by a number of the members of the new house of representatives is passed. The new bill, which will be something different in the line of medical legislation, will make it a misdemeanor, even a felony, for a doctor to cut out a perfectly good appendix.

The doctor will be required to show that the appendix he has taken was diseased. Many prominent doctors in this and other states have declared that at least fifty per cent of the appendices taken off are all right.

The fight over medical legislation promises to be even more fierce at the coming legislature than it was at the last, when there were lobbies of homœopaths, lobbies of osteopaths and lobbies of healing practitioners of all sorts at work on all sides.—*Times*, December 19th.



DENVER SECURES THE INSTITUTE MEETING. The following telegram, received at this office immediately following the two-days' session of Institute Trustees in Cleveland, Ohio, December 6th and 7th, pretty effectually disposes of any opposition which may have bobbed up in certain quarters and settles, for all time, the question of the meeting place of the American Institute of Homœopathy for the year 1913:

Cleveland, Ohio, December 8th.

J. W. Mastin, 719 Mack Building, Denver, Colo.

Your city selected; no other place mentioned.

J. RICHEY HORNER.

The letter published in last issue of THE CRITIQUE, while showing a pretty determined disposition to dispose of Denver, so far as the institute meeting was concerned, contained so many *reasons* for the deflection to some other city which were the very extreme edge of the limit of absurdity,

we felt certain the Institute Trustees would take some such action as the telegram indicates. The question of a few empty houses and other convincing contentions, might have applied with equal force to other localities. The principal point to be considered, now, is whether the profession of this city and state will join a whole-hearted enthusiasm in making the event one of which *Denver and the citizens of Denver* may have the satisfaction of looking upon with their customary approval of a thing well done.

Denver and Colorado have every attraction to be found elsewhere and many wholly their own: our climate in June is perfect; our roads are the best for automobiling; points of interest are within short railroad rides from the city; our hotel accommodations are ample and it is a well known fact that following large gatherings in Denver there has never been a wild and warlike wail against exorbitant charges on the part of hotel people and others who are usually credited with taking advantage of the unsuspecting tourist and convention delegate; railroad accommodations are ample, so taking everything into consideration there is no reason for thinking otherwise than "success" for the Denver meeting of the American Institute, June, 1913.

THE CRITIQUE may be relied upon for giving information as to hotel and railroad accommodations, as well as summer resorts of a high order.

Up to the present writing no definite arrangements have been made beyond the selection of the Union Pacific-Northwestern as the official route from Chicago, but if every other feature of the affair shows as much foresight and consideration for the comfort and convenience of those attending this convention, all doubts as to the absolute success of the meeting will be immediately placed at rest.



LIVE WIRE FOR HOMOEOPATHY AND THE DENVER MEETING. "In order to get there early and in good shape," as the writer expresses it, Dr. Alden E. Smith, of Freeport, Illinois, is beginning to lay plans for the success of his bureau in the forthcoming meeting of the American Institute of Homoeopathy by, at this early date, starting a canvass for contributions to the department of "Clinical Medicine and Pathology." By this early move he plans to give plenty of time in which to prepare papers, as well encourage those in charge of the scientific pro-

gram by turning in a finished and full feature early in the game. Dr. Smith is surely a "live wire" and deserves the many honors conferred upon him by his Illinois associates. It is such enthusiasm as this that spells success for any meeting, and if all adopt similar plans as those of Dr. Smith, the success of the Denver meeting, from a scientific standpoint, may be said to be already assured. We would not be at all surprised if the Institute, at the Denver meeting, recognized the doctor's ability and loyalty in a fitting manner. Here is the proposed program:

- (1) Symposium on Pneumonia.
 - a. A Brief History of and the Pathology of Pneumonia.
 - b. Diagnosis and Differential Diagnosis of Pneumonia.
 - c. The Internal Treatment of Pneumonia.
 - d. Adjuvants in the Treatment of Pneumonia.
 - e. Climate as a Predisposing Cause for Pneumonia.
- (2) Symposium on Typhoid Fever.
 - a. Predisposing Causes and the Pathology of Typhoid Fever.
 - b. Family Idiosyncrasies as a Predisposing Cause of Typhoid Fever.
 - c. Early Diagnosis of Typhoid Fever.
 - d. The Immediate Causes of Death and Complications in Typhoid Fever.
 - e. Diet and Hygiene in the Treatment of Typhoid Fever.
 - f. Internal Medication and Adjuvants in the Treatment of Typhoid Fever.
 - g. Vaccination as a Prophylaxis, and the Use of Bacterines in the Treatment of Typhoid Fever.
- (3) The Homoeopathic Versus Other Methods in the Treatment of Medical Cases.
- (4) Some of the Newer and More Practical Methods Being Used in Physical Diagnosis.
- (5) The Germ Theory and Its Present Day Value in Diagnosis.
- (6) The Influence of Disease in Modifying the Secretions, Excretions and Fluids of the Body.
- (7) Is Diagnosis a Necessity in Order to Apply the Remedy Homoeopathic to the Case.
- (8) The Field of Practicability with the Radiograph in Diagnosis.
- (9) Some New and Practical Paraphrenalia Utilized by the General Practitioner for Diagnosis and Treatment.
- (10) The Contagious and Infectious Diseases in this Country that are on the Wane and the Reasons for It.
- (11) Symposium on Tuberculosis.
 - a. Does Heredity Play Any Part in the Spread of Tuberculosis.
 - b. The Early Diagnosis and the Open Air Hygienic and Rest Treatment of Tuberculosis.
 - c. Results in the Administration of Homoeopathic Remedies in the Treatment of Tuberculosis.
 - d. Statistical Facts Relative to the Increase of Tuberculosis in this Country.
 - e. Dangers from and the Results Obtained in the Use of Tuberculine and a Diagnostic and Curative Agent in Tuberculosis.
 - f. Tuberculosis of the Lungs Compared to the Frequency of Tuberculosis in Other Parts of the Body.

Accompanying the "program" is the following list of questions, with blank spaces for answers, and as the doctor also incloses a stamped envelope for reply, common courtesy, if nothing else, should secure for his enthusiasm in this canvass a sufficiently large support to make his feature of the program at the Denver meeting one of the most thoroughly interesting of the session. Here is the doctor's "answer made easy" blank:

Do you seriously contemplate attending the Denver meeting of the A. I. H. in June, 1913?.....

If so, will you prepare a paper for the bureau of "Clinical Medicine and Pathology?"

In accordance with the outlined program (enclosed) kindly indicate the subject that you desire to write on. (If the verbiage of the subject selected from the outlined program is not satisfactory, kindly indicate the alterations you desire to have made, in order to have it meet your approval.)

Give title of proposed paper on any suitable independent subject.....

Is there some one that you would particularly care to have as disputant for your paper?.....

Name

Address

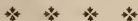
If you do not care to prepare a paper for this bureau, kindly indicate the paper that you will act as disputant on (giving number, or number and letter)



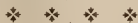
STRONG ARM OF STATE. One of the most surprising exhibitions of strength in state institutions was the recent action of New York's Regents in recinding recognition of the Boston University School of Medicine. This school is one of the staunchest in the United States; has a teaching staff of high class men and women and has turned out some of the brainiest and best doctors of any similar institution in the country. It is a *hômocopathic* school, by the way, and this action of the New York Regents is merely a forerunner for future events of a similar nature in other parts of the United States. The New York board is a scrambled affair, dominated by old school measures and men; Colorado homoeopaths have gone on record as recognizing this brand of public piracy.

MISCELLANEOUS

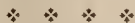
This number is the commencement of Volume Twenty of THE CRITIQUE.



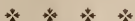
Dr. W. W. Sherwood, Pana, Ill., has the honor of being the first to pay subscription to THE CRITIQUE for 1913.



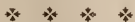
According to the *Homoeopathic Recorder*, Dr. C. M. Worth has removed from Box Elder, Neb., to Vernon, Colo.



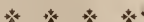
Anyone having a November number of THE CRITIQUE will confer a very great favor upon the editor by sending same to this office.



According to private advices, the Union Pacific-Northwestern is the combination chosen for the official route to the Denver meeting of the American Institute in June.



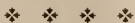
Dr. Margaret H. Beeler, Minneapolis, Minn., spent the holidays in Denver with relatives and friends. THE CRITIQUE is glad to learn she is prospering in her new location.



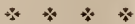
The cause assigned for failure of homoeopaths is their assinine assumption of ability to fight allopaths with allopathic artillery, instead of their own little pills. Anyone attempting such warfare deserves annihilation.



With this issue THE CRITIQUE commences the twentieth volume. It is here to stay as long as there is anything homoeopathic in sight. Just now the Institute is its incentive and we look forward to an interesting and highly creditable session of that body.



The special Psychiatry number of the *New England Medical Gazette*, comprising as it did a document of over three hundred pages, was something so unusual in medical magazine magnitude as to place it far and away ahead of any other undertaking of the sort in the history of such matters as to easily place it in a class by its lonesomeness. THE CRITIQUE extends congratulations.



According to several secular sheets of recent date, what was designated as the first commencement exercises of the Park Avenue Hospital, were held in the Woman's Club building, Wednesday evening, December 11th, at which time eight handsome young ladies were each presented with a document permitting them to follow the calling of a trained nurse. This Park Avenue proposition was formerly known as the Denver Homoeopathic Hospital, but from the fact that Dr. J. N. Hall, a prominent old school physician, delivered the commencement address and that the names of those nominally recognized as homœopaths were conspicuous by their failure to appear even as supernumeraries to the event, leads

THE CRITIQUE to surmise that this institution has passed, bodily, to old school control and management. We had hoped it possible to restore the old name by the time of the Institute's invasion of the city, but—Oh! "what's the use?"



The Homoeopathic Institute of Barcelona, Spain, propose printing (with the permission of Messrs. Boericke & Tafel) H. C. Allen's *Materia Medica of the Nosodes*. This will be accomplished in monthly installments of the *La Homoeopathica Practica*, 8 or 16 pages at a time, so the whole subject may be preserved and bound in book form. There is one place, at least, where homoeopathic materia medica is appreciated. We glean the foregoing information from the *Homoeopathic Recorder*.



SOUTHERN HOMOEOPATHIC SOCIETY.

The Southern Homoeopathic Medical Association at their meeting held in Richmond, Va., October 15, 16, 17, elected the following officers for the ensuing year:

DR. WELLFORD B. LORRAINE, Richmond, Va., President.
 DR. H. E. KOONS, Danville, Va., First Vice-President.
 DR. J. BURNIE GRIFFIN, St. Augustine, Fla., Second Vice President.
 DR. MYRON A. NEWMAN, Norfolk, Va., Treasurer.
 DR. LEE NORMAN, Louisville, Ky., Secretary.

Application blanks and all other information regarding the association may be obtained from the secretary.

LEE NORMAN,
 712 W. Broadway, Louisville, Ky.



IMPROVEMENTS IN MESA VERDE NATIONAL PARK.

The Department of the Interior proposes to spend \$16,647 on the Mesa Verde National Park during the fiscal year ending June 30, 1914, if the amount requested by the Secretary of the Interior is appropriated by Congress. This an increase of \$1,647 over the appropriation for the current fiscal year.

The principal items are for the repair and completion of the road to the ruins, construction of telephone system, and general administration.

The Mesa Verde National Park is situated in southwestern Colorado and may be reached from Mancos. Within the park jurisdiction are many notable prehistoric ruins, the cliff dwellings comprising a group of great importance to the study of American archaeology.

The principal and most accessible ruins are Spruce Tree House, Cliff palace and Balcony House. Spruce Tree House is located near the head of a draw of Navaho Canyon, and originally contained about 130 rooms, built of dressed stone laid in adobe mortar, with the outside tiers chinked with chips of rock or broken pottery. Cliff Palace, located about two miles east of the Spruce Tree House in a left branch of the Cliff Canyon, consists of a group of houses with ruins of 146 rooms, including twenty round kivas or ceremonial rooms, and a tapering loopholed tower, forming a crescent of about 100 yards from horn to horn, which is reputed to be one of the most famous works of prehistoric man in existence. Balcony House, a mile east of the Cliff House, in Cliff Canyon, contains about twenty-five rooms, some of which are in almost perfect condition. In each of these villages is an elaborate system of fortifications, with, in some cases,

walls 2.3 feet thick and 20 feet high, watchtowers 30 feet high, and block-houses pierced with small loopholes for arrows.

For the development and care of the national parks the Secretary of the Interior has asked Congress to appropriate the sum of \$733,014, an increase of \$505,464 over the appropriations for the current fiscal year. The national parks constitute ideal recreation grounds for thousands of people, but their development and use are seriously retarded by the lack of adequate roads and trails, and until sufficient money is appropriated for beginning a comprehensive plan of development the parks will fall far short of rendering the important public use for which they are intended. It is the intention of the department to make the principal places of interest in the parks more accessible, to render traveling more comfortable by sprinkling the roads throughout the dry season, and to guard the health of the traveler by the installation of proper water supply and sewerage systems. The responsibility for the future conduct of the national parks must rest with Congress, but the department feels that the financial needs of these reservations should be clearly presented to Congress in the annual estimates. A comprehensive list of books and magazine articles on the national parks has recently been issued by the Department of the Interior and may be obtained on application.



TRAINED NURSES FOR CEYLON, TURKEY AND INDIA.

Five trained nurses are needed at once in Christian hospitals in Turkey, India and Ceylon, respectively.

The work is essentially religious and Christian, and requires women who are in full sympathy with its missionary purpose. While denominational questions are not raised, membership in some Protestant church is expected. "It gives an opportunity to manifest the love of Christ, to show it in concrete form. That is the one unanswerable form that shuts out discussion. Moreover, it is a powerful argument to the reason: 'If the religion of Christ,' they say, 'leads to such unselfish work, such seeking of the good of others, there must be something in it. It is worth examining. There is nothing like it in our religion. We do works of charity, but it is to win merit for ourselves. Love is different.'"

Women who have administrative capacity and a gift for training other women in nursing, will find a large opportunity for work that is greatly needed.

The Hospital for Women and Children at Madura, South India, needs a nurse. Last year 519 patients were treated in the hospital; 14,771 in the dispensary. One thousand and sixty-seven of these were Mohammedans, 9,296 Hindus, 4,851 native Christians and 76 Europeans. Sixty-two operations were performed, 139 maternity cases cared for, 438 outside visits made, 40,390 prescriptions written. This work was carried on under the supervision of two physicians. There has never been an efficient American nurse connected with the hospital. In order that native workers may be properly trained, a well equipped trained nurse is urgently needed now. The Madura Mission is all within the limits of the Madura district of the Madras presidency and includes a population of 2,573,000 people. Tamil is the language of most of the native people.

The McLeod Hospital, Inuvil, Ceylon, needs one nurse to have entire charge of a training school for nurses and the organization of the nurses' staff of the hospital. This is one of the best hospitals in India, and is in charge of Dr. Isabel N. Curr. The work is practically self-supporting. Last year 1,142 patients were treated in the hospital and 3,205 in the dispensary.

The total population of Ceylon, an island which has about the area of West Virginia, is 3,592,397, largely made up of Buddhists, Hindus and Mohammedans. Five missionary physicians with three missionary hospitals and seven dispensaries constitute the Christian medical assistance available to all these people.

Inuvil is in the northern part of the island in a district the population of which is 177,971. The temperature is fairly equable, the rainfall light.

In the Ceylon Mission of the American Board there are six stations and twenty-three out-stations. Thirteen missionaries carry on medical, educational and evangelical work. Twenty churches with over 2,000 members have been organized. Seventy-five Sunday schools have a membership of 3,976 students.

Anatolia Hospital, at Marsovan, Asiatic Turkey, affiliated with Anatolia College. A new building is under construction which, when completed, will be one of the finest in Turkey. The hospital staff consists of three doctors, two foreign nurses, one dispenser, a nurses' training class and a force of twenty-five servants and helpers. In 1911 there were 852 in-patients (610 surgical, 242 medical); 3,690 new patients in clinic (804 operations). Of these, 367 were Armenians, 279 Turks, 176 Greeks. Marsovan is one of the stations in the Western Turkey Mission, of the American Board. To meet the needs of not less than 11,000,000 people, there are only seven hospitals and dispensaries.

The Hospital at Talas, Cesarea (Asia Minor), needs a nurse, to be associated with Miss Phelps. Last year 10,000 cases were treated. Talas is also in the Western Turkey Mission.

Azariah Smith Hospital, at Aintab, in the Central Turkey Mission, needs a nurse to be associated with Miss Bewer. This is one of the greatest missionary hospital plants in the world. One year over 46,000 cases were treated. The hospital is connected with the Central Turkey College and has a staff of eight workers. In 1911 ward patients to the number of 223 were treated; 353 major and 500 minor operations performed; 40,445 dispensary treatments given. There are 42 beds and two cribs in the hospital.

The Central Turkey Mission is serving these 1,586,000 people. Six stations and 52 out-stations have been established with a total force of thirty-five workers. Thirty-five churches have been organized with a membership of 6,542. Twenty-eight Sunday schools have a membership of 12,164. Reinforcements are urgently required.

The missionary hospital has introduced the profession of nursing to women in the East. The conservatism of Turkey has stood in the way of direct approach, on the part of male physicians at least, to the women of the country. The government has prevented the sending in of women physicians. The tremendous need of training native nurses presents a remarkable opportunity for service and for expressing the love of Christ in deeds of mercy and healing. The need in India is no less urgent and important where social customs and caste isolate the women from uplifting influences and medical attention.

The widespread influence of these hospitals is indicated by the fact that in Turkey the patients attending the mission hospitals have come from 1,200 different towns and villages, in many of which the Gospel has never been preached. There are many cases where the patient, returning, has reported his experience in the hospital in a way to arouse permanent interest.

All appointments are to be made by the American Board of Commissioners for Foreign Missions, which provides traveling expenses and living quarters in addition to the regular missionary salary.

Inquiries may be addressed to MR. WILBERT B. SMITH, 125 East 27th Street, New York City.

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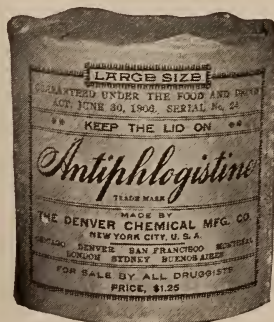
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PENNSYLVANIA STATE NOTES FOR JANUARY, 1913.

THE BUREAU OF MEDICAL EDUCATION AND LICENSURE OF PENNSYLVANIA, after January 1, 1914, will require for admission to a medical college, in addition to a standard four-year high school course or its equivalent, not less than one year college credits in chemistry, biology, physics and a modern language other than the English language or the equivalent thereof, to be determined by the Bureau of Professional Education, and for license to practice medicine in the state, a year of service as a hospital interne, or a year of post-graduate instruction approved by the Bureau of Medical Education and Licensure.

THE HOMOEOPATHIC MEDICAL SOCIETY OF THE COUNTY OF PHILADELPHIA held its regular monthly meeting Thursday evening, November 14, 1912, at 8:30 o'clock. A very interesting feature of the meeting was the discussion of "The Social Evil." Several noted physicians and many prominent laymen took active part in the discussion. Many other important matters were taken up. The meeting was well attended and proved to be extremely interesting. WILLIAM C. SYLVIS, M. D., *Secretary*.

THE PHILADELPHIA SOCIETY FOR CLINICAL RESEARCH held its regular monthly meeting Monday evening, November 25, 1912, at 9 p. m., at the office of Dr. J. E. James, 118 South Nineteenth street. Dr. Leopold read a very interesting paper on "Serum Treatment," which was well presented and was enjoyed by all the members. There was a full attendance of members and the meeting was an interesting one.

PERCY A. TINDALL, M. D., *Secretary*.

THE CLINICO PATHOLOGIC SOCIETY OF PHILADELPHIA held its regular monthly meeting at Hahnemann College, Saturday evening, November 16, 1912, at 9 p. m. The scientific program of the evening consisted of the following:

"The Positive Value of Urinalysis," DR. WM. A. PEARSON.

"An Interesting Case of Typhoid Fever," DR. WM. H. YEAGER.

"Transverse Myelitis Clinical and Pathological Report of a Case," DR. R. S. LEOPOLD.

A hearty discussion took place and the meeting was enjoyed by all present.

BENJ. K. FLETCHER, M. D., *Secretary*.

THE HOMOEOPATHIC MEDICAL SOCIETY OF THE TWENTY-THIRD WARD OF PHILADELPHIA held its regular monthly meeting Wednesday, November 20, 1912, at the Hotel Stenton. A paper on "Duodenal Ulcer" was read by Dr. W. Nelson Hammond and proved to be a very interesting feature of the meeting.

JOHN D. BOILEAU, M. D., *Secretary*.

THE GERMANTOWN HOMOEOPATHIC MEDICAL SOCIETY held its regular monthly meeting at the Majestic, Broad and Girard avenue, on Monday, the 18th of November, 1912, at 9 o'clock in the evening. A paper on "Deviations of the Septum" was well presented by Dr. George W. MacKenzie, after which a hearty discussion took place. There was a full attendance of members and the meeting was very interesting.

LANDRETH W. THOMPSON, M. D., *Secretary*.

THE WEST PHILADELPHIA GENERAL HOMOEOPATHIC HOSPITAL AND DISPENSARY held its regular monthly meeting at 1234 North Fifty-fourth street, on Tuesday evening, November 19, 1912. There were a large number of members present, and many matters of importance were taken up.

S. W. REEVES, M. D., *Secretary*.

THE HOMOEOPATHIC MEDICAL SOCIETY OF DELAWARE COUNTY held its regular monthly meeting in the Y. M. C. A. building, Chester, Pa., November 14, 1912, at 3:30 p. m. Dr. G. Harlan Wells, of Philadelphia,

read a paper on "A Consideration of the Treatment of Pulmonary Tuberculosis, With Special Reference to Tuberculin Therapy." Lunch was then served, at which many members were present. The meeting was a very interesting one and enjoyed by all present.

GEO. C. WEBSTER, M. D., *Secretary.*

THE WOMEN'S HOMOEOPATHIC MEDICAL ASSOCIATION OF PITTSBURG, PA., held its regular monthly meeting at the office of Dr. H. Ellen Walker, 17 Vine street, Sharon, Pa., on Thursday, November 21, 1912, at 2 p. m. A paper on "Rheumatism" was well presented by Dr. Chapman, and was a very interesting feature of the meeting.

MARY E. COFFIN, M. D., *Secretary.*

THE HOMOEOPATHIC MEDICAL SOCIETY OF CHESTER, DELAWARE AND MONTGOMERY COUNTIES held its holiday meeting Tuesday, December 10, 1912, at 1 p. m., at the Colonnade Hotel, Philadelphia. The scientific program consisted of the following:

"Modern Methods in the Diagnosis of Diseases of the Stomach,"
DR. G. HARLAN WELLS, *Philadelphia.*

"Progressive Co-ordination of Mind and Body from a Physical Standpoint" (as shown by a series of muscular movements), CARL B. SANFORD, *Physical Director Y. M. C. A., Chester.*

The program was a splendid one and was thoroughly enjoyed by a large number of members, who were present, all of whom enjoyed a luncheon which was served.

ISAAC CROWTHER, M. D., *Secretary.*

THE LUZERNE COUNTY HOMOEOPATHIC MEDICAL SOCIETY held its regular monthly meeting at the Homoeopathic Hospital, Pittston, October, 1912. A very interesting paper on "Vertigo" was read by Dr. C. C. Thompson. Dr. O. K. Grier delivered an interesting treatise on "Comparative Materia Medica," and Dr. T. M. Johnson gave a report of the Homoeopathic Interstate meeting held at Elmira, N. Y. The meeting was well attended and proved to be very interesting.

PERSONALS.—DR. ALEXANDER BECK ARTHUR and MRS. MARIE STEWART HAMMOND announce their marriage on Thursday, the fourteenth of November, one thousand nine hundred and twelve, in the city of Philadelphia.

DR. AND MRS. ALEXANDER BECK ARTHUR
AT HOME
AFTER THE FIRST OF JANUARY,
"PARK VALLEY FARM,"
PROSPECTVILLE, PENNSYLVANIA.

Mr. and Mrs. JOHN W. RIDPATH announce the marriage of their daughter, ANNA PHILLIS, to DR. GEORGE FRANKLIN BAER, on Tuesday, the nineteenth of November, one thousand nine hundred and twelve, Jenkintown, Pennsylvania.

AT HOME
AFTER JANUARY THE FIRST,
5938 ALDER STREET,
PITTSBURG, PENNSYLVANIA.

THE HAHNNEMANN HOSPITAL TRAINING SCHOOL FOR NURSES held its graduating exercises at Holy Trinity Parish House at 8 o'clock, Tuesday, November 26, 1912.

DR. G. HARLAN WELLS announces the removal of his office to 1807 Chestnut Street, Philadelphia. Diagnosis and internal diseases.

DR. H. WARD FISHER announces the opening of offices at corner of E. Northampton street and Park avenue, Wilkes Barre, Pa.

READING NOTICES

POST-GRIPPAL TREATMENT.—In nervous exhaustion resulting from la grippe nothing equals Cord. Ext. ol. Morrhuæ Comp. (Hagee) in tablespoonful doses before meals for adults.

Recovery of strength rapidly ensues, and relapses, so common in this disease, are prevented.

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MOUTH DISINFECTION.—There never was a time when so much thought was devoted to the prevention of disease as now. Modern science has shown that true prophylaxis starts with the individual. It is, accordingly, the age of personal hygiene, not the least important detail of which is mouth disinfection.

Among the latest and most effective measures that have been placed at the service of discriminating people for the proper care of the teeth and mouth, REDOX ALKALINE DENTAL CREAM unquestionably stands first. Evolved from the daily experience of one of the country's leading dentists, it embodies every quality essential to cleansing, whitening and preserving the teeth. It is effectively antiseptic, delightfully refreshing and sufficiently alkaline to counteract that most dangerous of mouth conditions, acid fermentation. It is a remedy, par excellence, for relaxed or diseased conditions of the mouth—Pyorrhea, Rigg's Disease.

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B. & T. OLIVE OIL.—Messrs. Boericke & Tafel have just issued an elegant little booklet on their olive oil. It contains a general review of the history and the medicinal of olive oil, together with a collection of valuable recipes for salads and cooking. B. & T. claim that you cannot get a *better* olive oil than theirs in the United States, though you can find much that is inferior. If you want a fine quality olive oil keep the B. & T. brand in mind, for you might as well get the best, especially as there is very little difference in price.

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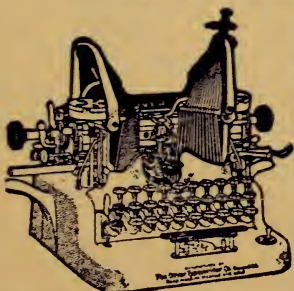
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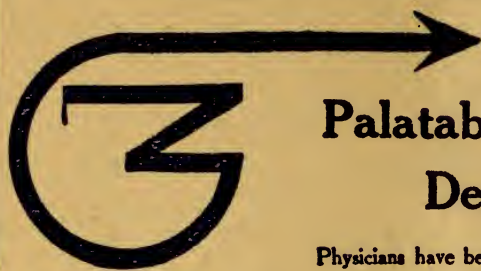
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